

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="text-align: center; font-size: 1.2em; font-family: cursive;">DAVID CANTRELL</div>	14. REPORT COVERING THE PERIOD FROM: <u>7-27-10</u> TO: <u>10-1-10</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ Ø

b. Itemized Contributions (over \$100 from each source this period) \$ 500

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 500

16. LOANS RECEIVED THIS REPORTING PERIOD \$ Ø

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ Ø

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 500

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>WEBSITE FEES</u>	\$ <u>99.75</u>
<u>CAMPAIGN MATERIALS</u>	\$ <u>91.69</u>
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 191.44

b. Itemized Expenditures (Over \$100 each payee this period) \$ 3593.56

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 3785

20. LOAN REPAYMENTS MADE THIS PERIOD \$ Ø

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 3785

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ Ø

b. Itemized in-kind contributions (over \$100 from each source this period) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ Ø

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ _____

b. Itemized Obligations Outstanding (Over \$100 each) \$ _____

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ Ø



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE DAVID CANTRELL				2. REPORT COVERING THE PERIOD FROM 7/27/10 TO: 10-1-10			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 500		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name R.		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name Decosimo				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500	
Address 822 James Blvd.				<input type="checkbox"/> Runoff (Local Elections Only)			
City SIGNAL MTN		State TN	Zip Code 37377	Date of Contribution 7/28/10		Aggregate This Election 500	
Occupation RETIRED							
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation							
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation							
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation							
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)</small>					500		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE DAVID CANTRELL		2. REPORT COVERING THE PERIOD FROM: 7/27/10 TO: 10-1-10		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount Ø	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name TIMES FREE PRESS		AD	555	
Address P.O. BOX 2331				
City CHATTANOOGA	State TN			Zip Code 37409
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name POSTMASTER		POSTAGE	1141.39	
Address				
City CHATTANOOGA	State TN			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name KICKOFF		MAILOUT LABOR	248.28	
Address 1401 Carter St.				
City CHATTANOOGA	State TN			Zip Code 37402
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name TIMES FREE PRESS		AD/BANNER	1373.25	
Address SAME				
City	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name LONE OAK CLINIC		DONATION	275.64	
Address HWY 127				
City LONE OAK	State TN			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
5. TOTAL ITEMIZED EXPENDITURES <small>(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)</small>			3593.56	